## Foster Family Home - Corrective Action Report

Provider ID:

1-559346

Home Name:

Marina Gamatero, CNA

Review ID:

1-559346-9

94-095 Hulahe Street

Reviewer:

Maribel Nakamine

Waipahu

HI 96797 Begin Date:

10/19/2020

Comment: Annual visit for a 3 person CCFFH completed.  Corrective Action Report issued during CCFFH visit with all items due to CTA within 30 days.  6.(d)(1)- see applicable sections of the review  Foster Family Home Background Checks [11-800-8]  8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;  8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and Comment:  8.(a)(1), (2)- HHM#5 without evidence of current APS/CAN/Fingerprinting or Ecrim (in place of fingerprinting) in CCF binder.  Foster Family Home Information Confidentiality [11-800-16]  16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies are procedures and client privacy rights.  Comment:  16.(b)(5)- HHM#4 and HHM#5 were without evidence of confidentiality policies and procedures and client privacy rights.	Foster Family Home	Required Certificate	[11-800-6]
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The state of the s	Foster Family Home	Personnel and Staffing	[11-800-41]
41.(f)(1) Tuberculosis clearances that meet department of health guidelines, and	41.(f)(1) Tub	perculosis clearances that meet department of h	nealth guidelines; and

41.(f)(1)- CG#4's TB clearance lapsed on 8/23/2020. No current results seen in CCFFH binder.

Primary Care Giver

Merikel Malcamine, wo

Date 10/19/2020

Date

Comment:

CTA RN Compliance Manager: Maribel Nakamine

## Community Care Foster Family Home (CCFFH) Written Corrective Action Plan (CAP) Chapter 11-800

PCG's Name on CCFFH Certificate: Marina Gamatero

CCFFH Address:

(PLEASE PRINT) 94-095 Hulahe Street, Waipahu, HI 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken - How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8.(a) (1),(2)	HHM#5 obtained a current APS/CAN/Ecrim. Result was filed in CCFFH binder.	10/19/20	CG#1will utilize an iphone calendar to schedule 2 months in advance of due dates.
16. (b) (5)	HHM#4 & HHM#5 training provided on the confidentiality policies and procedures and client privacy rights. It was signed and filed in CCFFH binder.	10/20/20	Home will provide a reminders/notes that every changes in substitute caregivers or HHM must sign.
41. (f) (1)	2020 TB clearance was obtained for CG#4. It was placed into home record.	10/23/20	Home will utilize an iphone calendar to put all due dates on. CG#1 will inform other caregivers when an item is due two weeks before it is due.

All items that	were fixed are	attached to this CAP
PCG's Signature:	TIMUM	attached to this CAP

Date: 11/5/2020

CTA has reviewed all corrected items